Trusted Contact Person
Authorization Form

TCP

Account Number | | | | | | | | |

Rep ID | | | |

Instructions: This form gives permission to LPL Financial LLC and its associated persons, including your financial advisor (collectively referred to as "LPL"), to use their discretion to contact the trusted contact person listed below and disclose information about you and your account(s) in order to:

- address concerns that you might be a victim of financial exploitation which could include fraud, coercion, or unauthorized transactions,
- address a temporary hold on a disbursement of funds or securities pertaining to possible financial exploitation or other concerns,
- confirm your current contact information,
- confirm and address your whereabouts and health status, and/or
- confirm the identity of any legal guardian, executor, trustee, holder of a power of attorney, or other person who may be acting on your behalf (such as an attorney or accountant).

The trusted contact person is intended to be a resource for LPL in administering your accounts, protecting your assets, and responding to possible financial exploitation.

This form does not authorize the trusted contact or other people to conduct transactions in your account. If you would like to do so, use the LPL Form F10 titled "Trading Authorization".

If you only want to give permission to your advisor to share personal identifiable information to a third party such as a tax advisor, legal advisor or relative, use the LPL Form F456 titled "Permission to Disclose Personal Identifiable Information ("PII")".

If you want to add an interested party to receive duplicate statements or trade confirmations, use the LPL Form F682 titled "Authorization for Duplicate Statements Request".

Note: Your trusted contact person must be age 18 or older. LPL suggests that the trusted contact person not be someone who is already authorized to transact business on the account, or who is already otherwise able to receive information about the account, such as a joint account holder.

Please fax the completed form to LPL New Accounts at (858) 202-8325 or email to imaging.email@lpl.com.

1. Account Information

If you have multiple account numbers, please list one of your account numbers in both the top right hand corner and below.

Account Number _____ Account Number _____ Account Number _____

Account Number _____ Account Number _____ Account Number _____

The information provided with this form will apply to all accounts listed on the form.

2. Trusted Contact Person Information

Name _____ Email Address _____

Address _____

Home Phone _____ Business Phone _____ Cell Phone _____

Relationship to Account Holder (Spouse, Relative, Friend, Professional Relationship, Other) _____

This trusted contact person information supersedes any previous trusted contact person information you may have provided for the listed accounts.

3. Remove Trusted Contact Person

☐ With this form, I instruct LPL to remove my existing trusted contact person. I do not wish to add a replacement at this time.

4. Acknowledgment

I authorize LPL to contact my trusted contact person listed above. I understand that providing this information is optional and I may withdraw it at any time.

Account Holder Signature _____ Account Holder Name (print) _____ Date _____